

N33995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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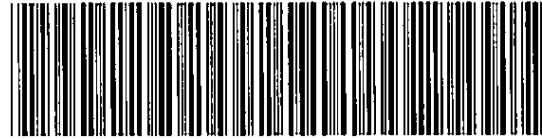
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

R/A-ct

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Terra Mar Homeowners' Association
Name of Corporation

DOCUMENT NUMBER: N 33995

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Susan Ray
Name of Contact Person

Terra Mar HOA
Firm/Company

4515 South Ocean Blvd
Address

Highland Beach FL 33487
City/State and Zip Code

susanray3@gmail.com ✓
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan Ray at (561) 706-7070
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Terra Mar Homeowners' Association, Inc.
2. The principal office address: 4515 S. Ocean Blvd
Highland Beach FL 33487
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 8/29/1989 Document number: N 33 995

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

resigned

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Elaine Smith
4519 South Ocean Blvd.
P.O. Box NOT acceptable
Highland Beach FL 33487

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TALLAHASSEE, FL

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature] Larry Smith, VP
Signature of an officer or director Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I confirm that the corporation has been notified in writing of this change.

[Signature] 8/16/19
Signature of Registered Agent Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314